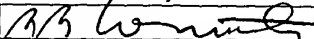
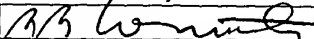
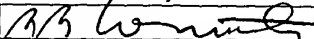


UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. DYNG.P001																											
First Inventor David Kitson		Title Orthopaedic Surgery Method																											
Express Mail Label No. EV 326 938 901 US																													
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450																											
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></p><p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p><p>3. <input checked="" type="checkbox"/> Specification [Total Pages <u>37</u>] <small>(preferred arrangement set forth below)</small> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p><p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>11</u>]</p><p>5. Oath or Declaration [Total Sheets _____] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p><p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p></div><div style="width: 48%;"><p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p><p>8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies</p></div></div>																													
ACCOMPANYING APPLICATION PARTS																													
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English Translation Document <input type="checkbox"/> (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>																													
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:</p> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Continuation</div><div><input type="checkbox"/> Divisional</div><div><input type="checkbox"/> Continuation-in-part (CIP)</div><div>of prior application No.: _____</div></div> <p><small>Prior application information: Examiner _____ Art Unit: _____</small> For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																													
19. CORRESPONDENCE ADDRESS																													
<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Customer Number: _____</div><div>OR <input checked="" type="checkbox"/> Correspondence address below</div></div>																													
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20%;">Name</td><td colspan="3">Shemwell Gregory & Courtney LLP</td></tr><tr><td rowspan="2">Address</td><td colspan="3">4880 Stevens Creek Blvd.</td></tr><tr><td colspan="3">Suite 201</td></tr><tr><td>City</td><td>San Jose</td><td>State</td><td>CA</td></tr><tr><td>Country</td><td>US</td><td>Telephone</td><td>408-236-6647</td></tr><tr><td></td><td></td><td>Zip Code</td><td>95129</td></tr><tr><td></td><td></td><td>Fax</td><td>408-236-6641</td></tr></table>			Name	Shemwell Gregory & Courtney LLP			Address	4880 Stevens Creek Blvd.			Suite 201			City	San Jose	State	CA	Country	US	Telephone	408-236-6647			Zip Code	95129			Fax	408-236-6641
Name	Shemwell Gregory & Courtney LLP																												
Address	4880 Stevens Creek Blvd.																												
	Suite 201																												
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		Fax	408-236-6641																										
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 40%;">Name (Print/Type)</td><td>Barbara B. Courtney</td><td style="width: 20%;">Registration No. (Attorney/Agent)</td><td>42,442</td></tr><tr><td>Signature</td><td></td><td>Date</td><td>September 24, 2003</td></tr></table>			Name (Print/Type)	Barbara B. Courtney	Registration No. (Attorney/Agent)	42,442	Signature		Date	September 24, 2003																			
Name (Print/Type)	Barbara B. Courtney	Registration No. (Attorney/Agent)	42,442																										
Signature		Date	September 24, 2003																										

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1588.00

Complete if Known

Application Number	Not yet assigned
Filing Date	HEREWITH
First Named Inventor	David Kitson
Examiner Name	Not yet assigned
Art Unit	Not yet assigned
Attorney Docket No.	DYNG.P001

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number 501914

Deposit Account Name Shemwell Gregory & Courtney LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	750
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$) 750

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Extra Claims Fee from below Fee Paid
Total Claims 37 -20** = 17 X 18 = 306
Independent Claims 6 -3** = 3 X 84 = 252
Multiple Dependent 280 = 280

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 838

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid.

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type) Barbara B. Courtney

Registration No. 42,442
(Attorney/Agent)

(Complete if applicable)

Telephone 408-236-6647

Signature

Date September 24, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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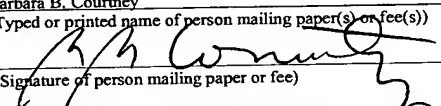
EXPRESS MAIL CERTIFICATE OF MAILING

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Barbara B. Courtney

(Typed or printed name of person mailing paper(s) or fee(s))


(Signature of person mailing paper or fee)

September 24, 2003
(Date signed)

Serial/Patent No.: Not yet assigned Filing/Issue Date: HEREWITH Client: D. Young & CO
Title: ORTHOPAEDIC SURGERY PLANNING

Atty. Docket No.: DYNG.P001 Date Mailed: September 24, 2003

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | |
|--|---|
| <input type="checkbox"/> Amendment/Response (pgs.) | <input type="checkbox"/> Petition for Extension of Time (month(s)) |
| <input type="checkbox"/> Preliminary Amendment (pgs.) | <input checked="" type="checkbox"/> Information Disclosure Statement & PTO/SB/08A |
| <input checked="" type="checkbox"/> Application - Utility (37 pgs.) | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Application - Rule 1.53(b) Contin. (pgs.) | <input type="checkbox"/> Submission of Formal Drawings |
| <input type="checkbox"/> Application - Rule 1.53(b) Divis. (pgs.) | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (pgs.) | <input type="checkbox"/> Appeal Brief (pgs. in triplicate) |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA (pgs.) | <input type="checkbox"/> Reply Brief |
| <input type="checkbox"/> Application - PCT (pgs.) | <input type="checkbox"/> Response to Notice of Missing Parts |
| <input type="checkbox"/> Application - Provisional (pgs.) | <input checked="" type="checkbox"/> Utility Patent Application Transmittal |
| <input checked="" type="checkbox"/> Drawings (11 sheets) | <input checked="" type="checkbox"/> Fee Transmittal (in duplicate) |
| <input type="checkbox"/> Declaration & POA (pgs.) | <input checked="" type="checkbox"/> Itemized Postcard |
| <input type="checkbox"/> Assignment & Cover Sheet (pgs.) | <input checked="" type="checkbox"/> Express Mail Certificate Of Mailing |
| <input type="checkbox"/> Power of Attorney | <input checked="" type="checkbox"/> Express Mail No. <u>EV 326 938 901 US</u> |
| <input type="checkbox"/> Nonpublication Request (35 USC 122(b)) | <input checked="" type="checkbox"/> Check No. <u>3114</u> Amt <u>\$1588.00</u> |
| <input checked="" type="checkbox"/> Other <u>Copies of four (4) cited references</u> | |